NEW YORK WING STAFF APPLICATION

ACTIVITY INFORMATION Name of Activity			Location				Start and End Date	
CAP UNIT INFORMATION								
Charter # Squadron Name			Group Name					
APPLICANT INFORMATION)N							
Name of Applicant (Last, First, MI)		Date Joined CAP mmyy		Gender CAP Grade		Age	CAPID	
Street Address			City				State	
ip E-mail Address					Web Page Add		ess	
lome Phone B	Business Phone	Pager		Cel	I Phone		Other (Specify)	
. LIST PREVIOUS E	NCAMPMENTS AT	TENDED						
Year Encampment		Position Held		Held	i		Awards	
		_						
			-					
I. LIST OTHER LEA	DERSHIP TRAININ	G (i.e., Lead	ership Sch	ools, COS	S, ROTC, clu	ıbs, spo	orts, jobs, etc.)	
Year Activity			Position Held		Awards			
	ING FOR (Rank O							
COMMAND	EXECUTIV						STAN/EVAL (SET)	
_	Commander Finance				First Sergeant+		SET	
_ Deputy Commander	Logistics * Food Oper	otiono.			mmander+	_	THER (Liet)	
Commandant of Cadets* Food Opera Executive Officer Public Affair					on First Sergeant+ Commander		OTHER (List)	
Liaison Officer*	Training	15		int Commi ht Sergea				
_ Claison Officer Safety*	Medical			ef TAC Of				
_ Chaplain*	Air Operation	ons+		C Officer*				
_ MLO*	Administrat							
*Senior Member Position Or			+P0	sition may r	not be needed			
V. OTHER INFORMA								
Will you be bringing a CAP	radio Yes 🗌 N		o, please w	•	•		all Sign	
vith you to the activity?			Check if yo	u do not h	ave a call sigr	٦.		
wish to apply for the Staff Po	neitione indicated abo	NA HOWOVET	Lwill porfor	n any duty	accianad to m		′es □ No	
Cadets Only) I have attached								
ood job in the positions.		- 30, 000mmg		CAPOTION		pianin		
•								
Signature of Applicant			late					
Signature of Applicant		D	ate					
certify that the applicant is a	member in good sta	anding in my u	nit and I app	rove his/he	er request.			
,	- J-1	J, w.			1			
Signature of Unit Commander			Date					